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CENTRAL FAX CENTER

FEB 28 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. 10/774,146
Confirmation No. 8437
Filing Date February 6, 2004
Inventor..... Kerry D. Steele et al.
Assignee..... Battelle Memorial Institute
Group Art Unit..... 2617
Examiner Sheila B. Smith
Attorney's Docket No. E-1672 (BA4-215)
Customer No. 021567
Title: Communications Device Identification Methods, Communications Methods,
Wireless Communications Readers, Wireless Communications Systems, And
Articles Of Manufacture

Assistant Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

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2. Response to 11/30/2006 Office Action

Dated: 2/28/2007

By: 

Natalie King
Telephone No. (509) 624-4276
Facsimile No. (509) 838-3424

NUMBER OF PAGES IN FACSIMILE: 20

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PTO/SB/21 (07-06)


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10774,146	RECEIVED CENTRAL FAX CENTER FEB 28 2007
	Filing Date	February 6, 2004	
	First Named Inventor	Kerry Dale Steele	
	Art Unit	2617	
	Examiner Name	Sheila B. Smith	
Total Number of Pages in This Submission	Attorney Docket Number	BA4-215	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Customer No. 021567		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Wells St. John P.S.		
Signature			
Printed name	James D. Shaurette		
Date	2/28/07	Reg. No.	39,833

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RESPONSE TO NOVEMBER 30, 2006 OFFICE ACTION

To: Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

From: James D. Shaurette (Tel. 509-624-4276; Fax 509-838-3424)
Wells, St. John, P.S.
601 W. First Avenue, Suite 1300
Spokane, WA 99201-3828

Sir:

This is a response to the Office Action dated November 30, 2006, Applicants
amend and remark as follows:

AMENDMENTS